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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: PRASAD V. UPADRASTA  
Serial No.: 09/613,323  
Filed: July 11, 2000  
For: FACILITATING SEARCHING ON  
MULTICAST RECEIVERS

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Group Art Unit: 1428

Examiner:

Atty. Dkt. No.: INTL-0398 US

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REQUEST FOR CORRECTED OFFICIAL FILING RECEIPT

Commissioner for Patents  
Office of Initial Patent Examination  
Customer Service Center  
Washington, D.C. 20231

Dear Sir:

Enclosed is a copy of the Official Filing Receipt marked in red to show a correction that is needed. The correction is as follows:

Please correct the name of the inventor to --PRASAD V. UPADRASTA--.

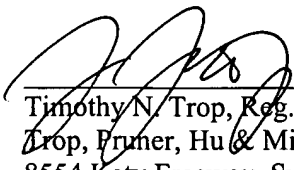
Issuance of a corrected Official Filing Receipt is respectfully requested.

☒ This Request for Corrected Official Filing Receipt is being filed to correct a Patent Office error. No fee is required.

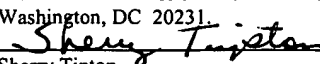
☐ The \$25.00 fee required under 37 C.F.R. § 1.19(h) to correct an Official Filing Receipt due to applicant error: ☐ is enclosed; ☐ is authorized to be charged to Deposit Account No. 20-1504 and this paper is submitted in duplicate.

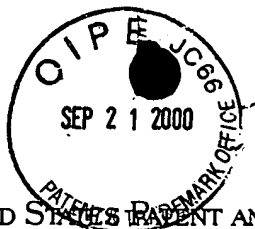
Respectfully submitted,

Date: 9/18/00

  
Timothy N. Trop, Reg. No. 28,994  
Trop, Pruner, Hu & Miles, P.C.  
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I hereby certify under 37 CFR 1.8(a) that this correspondence is being deposited with the United States Postal Service as first class mail with sufficient postage on September 18, 2000 and is addressed to the Assistant Commissioner for Patents, Washington, DC 20231.

  
Sherry Tipton



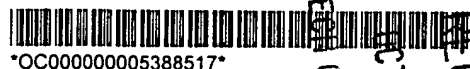
## UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS  
UNITED STATES PATENT AND TRADEMARK OFFICE  
WASHINGTON, D.C. 20231  
www.uspto.gov

APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/613,323	07/11/2000	2711	1428	INTL-0398- US(P8981)	7	35	9

Timothy N Trop  
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Housaton, TX 77024

## FILING RECEIPT



\*OC000000005388517\*

Date Mailed: 09/11/2000

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Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the PTO processes the reply to the Notice, the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

## Applicant(s)

Prasad V. Upadrastra, Chandler, AZ ;

*Upadrastra*

Continuing Data as Claimed by Applicant

Foreign Applications

If Required, Foreign Filing License Granted 09/09/2000

## Title

Facilitating searching on multicast receives

## Preliminary Class

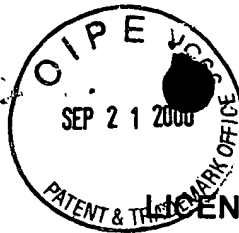
711

Data entry by : DADE, JOAN

Team : OIPE

Date: 09/11/2000





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- The title is recorded in sentence case.

Any corrections that may need to be done to your Filing Receipt should be directed to:

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Bib Data Sheet

<b>SERIAL NUMBER</b> 09/613,323	<b>FILING DATE</b> 07/11/2000 <b>RULE</b> -	<b>CLASS</b> 711	<b>GROUP ART UNIT</b> 2711	<b>ATTORNEY DOCKET NO.</b> INTL-0398-US (P8981)
<b>APPLICANTS</b> Prasad V. Upadrasta, Chandler, AZ ;				
** CONTINUING DATA *****				
** FOREIGN APPLICATIONS *****				
<b>IF REQUIRED, FOREIGN FILING LICENSE</b> <b>GRANTED ** 09/09/2000</b>				
Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	<b>STATE OR COUNTRY</b> AZ	<b>SHEETS DRAWING</b> 7	<b>TOTAL CLAIMS</b> 35
Verified and Acknowledged	Examiner's Signature _____ Initials _____			<b>INDEPENDENT CLAIMS*</b> 9
<b>ADDRESS</b> Timothy N Trop Trop Pruner & Hu PC 8554 Katy Freeway Suite 100 Housaton ,TX 77024				
<b>TITLE</b> Facilitating searching on multicast receives				
<b>FILING FEE RECEIVED</b> 1428	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	